

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/785611</u>	Examiner : <u>Patel</u>	GAU : <u>2879</u>
From: <u>PAP</u>	Location: <u>IDC</u> FMF FDC	Date: <u>11/17/05</u>
Tracking #: <u>EPM 10/785611</u>		Week Date: <u>9/26/05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>2/24/04</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Original claim 11 depends on claim 10
and original claim 12 (see line 2 of claim 11).
Please advise.

Thank you.

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
 REV 10/04